

## Chemical Engineering Co-op Program

### Co-Op Job Acceptance Form

*Email completed form to Co-Op coordinator and to assigned academic advisor*

PUID \_\_\_\_\_ LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

EMAIL \_\_\_\_\_ ACADEMIC ADVISOR \_\_\_\_\_

DATE \_\_\_\_\_

Please provide the following information:

CO-OP COMPANY: \_\_\_\_\_

LOCATION \_\_\_\_\_

SALARY (PER MONTH) \_\_\_\_\_

(Weekly X 4.3)

**Add any additional benefits provided (e.g.: housing, relocation, stipend, Co-op fee reimbursed (or part of it), sign-on bonus, etc.)**

Intended Initial Work Schedule:

Semester/Term	Semester/Term	Semester/Term	Semester/Term	Semester/Term